HHW Program Survey for Fiscal Year 2002/2003 County:___ Jurisdiction: Agency Contact_____ E-Mail: Phone Number____ **QUANTITY OF HHW COLLECTED IN FY 02/03** From Form 303 Pounds (total) Total for All HHW Latex Paint Oil Paint/Stains Electronic Waste What is the total population of your program service area? ________________ HHW PROGRAM COSTS IN FY 02/03 Salary and Benefits -Indirect Costs (Agency Overhead) Public Education/Outreach \$ _ \$ Materials and Supplies Insurance Haz. Waste Contractor Costs \$ -\$ Labor \$ Transportation \$ Set-up/Mobilization Equipment \$ Total Recycling/Disposal Cost Latex Paint Oil Paint/Stains All other waste Other Costs (please explain) \$ Total HHW Program Cost \$ **LATEX PAINT MANAGEMENT** What does the program do with the latex paint collected? 2. Is the paint sorted by color or other characteristics?_____ If yes, what is your protocol?___ 3. How is your paint prepared for recycling (loose pack, bulked)?______ 4. Is this paint sent to a recycler for reprocessing? 5. What happens to the paint after it is reprocessed? ______ 6. Does your program sell recycled paint? If yes, please describe program. **ELECTRONIC WASTE MANAGEMENT** 1. Is your HHW program the lead agency in charge of electronics collection in your city or county? 2. If yes, do you anticipate continuing to be the lead agency for this waste stream after 2006?_____ NON-CERTIFIED USED OIL COLLECTION CENTERS 1. Has your HHW program received used oil containing polychlorinated biphenyl (PCB) or halogenated wastes? ___ 2. If yes, enter the type of contaminate and gallons of used oil required to be disposed at a higher cost than the cost generally to recycle the used oil?____ 3. If yes, enter the type of non-certified center that received the contaminated used oil (Non-Certified Center; ABOP Agricultural; Marina; Airport). 4. Enter the disposal costs for each occurrence requiring the used oil to be disposed at a higher cost than the cost generally to recycle the used oil? Thank you for your input. Please return the survey with Form 303 to: Department of Toxic Substances Control Regulatory Program Development Branch HHW Unit, 11th floor

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